

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
101655543

FILING DATE

5/17/06

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1		/		
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TOTAL IND.		3		
TOTAL DEP.		17		
TOTAL CLAIMS	20			

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